

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: 5-SUBSTITUTED-ALKYLAMINOPYRAZOLE
DERIVATIVES AS PESTICIDES

Attorney Docket Number:: 033495-014

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David Teh-Wei

Middle Name::

Family Name:: CHOU

Name Suffix::

City of Residence:: Bad Soden

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Joseph-Haydn-Strasse 18

City of Mailing Address:: Bad Soden

State or Province of Mailing
Address::

| | |
|---|---------------------------------|
| Country of Mailing Address:: | Germany |
| Postal or Zip Code of Mailing Address:: | 65812 |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | The Netherlands |
| Status:: | Full Capacity |
| Given Name:: | Henricus Maria Martinus |
| Middle Name:: | |
| Family Name:: | BASTIAANS |
| Name Suffix:: | |
| City of Residence:: | Usingen |
| State or Province of Residence:: | |
| Country of Residence:: | Germany |
| Street of Mailing Address:: | Bartolomaeus-Arnoldi-Strasse 35 |
| City of Mailing Address:: | Usingen |
| State or Province of Mailing Address:: | |
| Country of Mailing Address:: | Germany |
| Postal or Zip Code of Mailing Address:: | 61250 |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Germany |
| Status:: | Full Capacity |

Given Name:: Anke
Middle Name::
Family Name:: KUHLMANN
Name Suffix::
City of Residence:: Schwalbach a. Ts.
State or Province of Residence::
Country of Residence:: Germany
Street of Mailing Address:: Am Brater 11
City of Mailing Address:: Schwalbach a. Ts.
State or Province of Mailing Address::
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: 65824

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Maria-Theresia
Middle Name::
Family Name:: THÖNESSEN
Name Suffix::
City of Residence:: Heidesheim
State or Province of Residence::

| | |
|---|---------------------|
| Country of Residence:: | Germany |
| Street of Mailing Address:: | Frauenlobstrasse 10 |
| City of Mailing Address:: | Heidesheim |
| State or Province of Mailing Address:: | |
| Country of Mailing Address:: | Germany |
| Postal or Zip Code of Mailing Address:: | 55262 |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Germany |
| Status:: | Full Capacity |
| Given Name:: | Stefan |
| Middle Name:: | |
| Family Name:: | SCHNATTERER |
| Name Suffix:: | |
| City of Residence:: | Hattersheim |
| State or Province of Residence:: | |
| Country of Residence:: | Germany |
| Street of Mailing Address:: | Schillerring 10 |
| City of Mailing Address:: | Hattersheim |
| State or Province of Mailing Address:: | |
| Country of Mailing Address:: | Germany |

Postal or Zip Code of Mailing
Address::

65795

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

Uwe

Middle Name::

Family Name::

DÖLLER

Name Suffix::

City of Residence::

Rodgau

State or Province of Residence::

Country of Residence::

Germany

Street of Mailing Address::

Christian-Morgenstern-Strasse 11

City of Mailing Address::

Rodgau

State or Province of Mailing
Address::

Country of Mailing Address::

Germany

Postal or Zip Code of Mailing
Address::

63110

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Jamin

Middle Name::

Family Name:: HUANG

Name Suffix::

City of Residence:: Chapel Hill

State or Province of Residence:: NC

Country of Residence:: US

Street of Mailing Address:: 233 Old Forest Creek Drive

City of Mailing Address:: Chapel Hill

State or Province of Mailing Address:: NC

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 27514

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Karl

Middle Name::

Family Name:: SEEGER

Name Suffix::

City of Residence:: Hofheim

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Schwalbenweg 9

City of Mailing Address:: Hofheim

State or Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 65719

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Andrew

Middle Name::

Family Name:: SCRIBNER

Name Suffix::

City of Residence:: Durham

State or Province of Residence::

Country of Residence:: US

Street of Mailing Address:: 4205 Ellisfield Drive

City of Mailing Address:: Durham

State or Province of Mailing Address:: NC

Country of Mailing Address:: US

Postal or Zip Code of Mailing Address:: 27705

| | |
|---|-------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Mexico |
| Status:: | Full Capacity |
| Given Name:: | Adalberto |
| Middle Name:: | A. |
| Family Name:: | PEREZ DE LEON |
| Name Suffix:: | |
| City of Residence:: | Wake Forest |
| State or Province of Residence:: | NC |
| Country of Residence:: | US |
| Street of Mailing Address:: | 716 Sarratt Ridge Court |
| City of Mailing Address:: | Wake Forest |
| State or Province of Mailing Address:: | NC |
| Country of Mailing Address:: | US |
| Postal or Zip Code of Mailing Address:: | 27587 |

Correspondence Information

| | |
|----------------------------------|----------------|
| Correspondence Customer Number:: | 21839 |
| Phone Number:: | (703) 836-6620 |
| Fax Number: | (703) 836-2021 |

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|---|----------------------|----------------------|
| This Application | National Stage of | PCT/EP03/02009 | 02/27/03 |
| PCT/EP03/02009 | An application claiming the benefit under 35 USC 119(e) | 60/361,328 | 03/05/02 |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| EP | 02027033 | 12/03/02 | Yes |

Assignee Information

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|---|------------------------|
| Assignee Name:: | Bayer CropScience S.A. |
| Street of Mailing Address:: | 55 avenue René Cassin |
| City of Mailing Address:: | Lyon |
| State or Province of Mailing Address:: | |
| Country of Mailing Address:: | France |
| Postal or Zip Code of Mailing Address:: | F-69009 |